



CITY OF GREENVILLE PARKS & RECREATION
ADULT SOFTBALL –SPRING / SUMMER 2010
TEAM ENTRY FORM

TEAM NAME: _____

TYPE OF TEAM (circle one of the following): Men, Women, Coed.

Please circle one of the following divisions:

(A division must have at least five (5) teams to appear on a schedule of its own).

Men's Church, Men's Open, Men's REC., Women's Open, Women's Church

Coed Church, Coed Closed, Coed Open, Coed REC., Coed Open- AM (Friday mornings)

***NIGHT PREFERRED FOR GAMES:** Put one of the following numbers in the blank by each day.

1 = Best 2 = Good 3 = Possible 4 = Possible 5 = Can not play

Monday _____ (men's church, coed law)

Tuesday _____ (men's open, men's REC., coed open, coed REC., coed closed)

Wednesday _____ (men's open, men's REC., coed law, coed open, coed REC.)

Thursday _____ (men's open, men's REC., coed open, coed REC., coed church)

Friday _____ (coed morning, men's church, women's church, women's open, coed open & coed REC.)

*I will do my best to put your team on your preferred night. However, you may have to make a decision to determine if the night is more important than the division (all of the above softball divisions will be played at night, unless otherwise noted). **Men's games will be played at Gower Park. Coed and Women's games will be played at Cleveland and/or Gower Parks.**

Registration Deadline: **March 31, 2010 (**Early registration will end on March 16**)

The **team entry fee (\$ 275** if paid on, or before **March 16**, or \$300 if paid after March 16) and this **completed entry form** will only be accepted at the **Cleveland Park Center-beginning February 18** (Monday – Friday). Please call, or email before coming to the office.

**** Team registration could end before the registration deadline, if all of the limited spaces are filled.**

Please make checks, or money orders payable to the following:

City of Greenville Adult Softball

CONTACT INFORMATION:

Name of Coach: _____

Cell phone number: _____; Other numbers: _____

Email address (1): _____

Email address (2): _____

Signature of responsible adult: _____

Date: _____

For more information and directions to Cleveland Park Center:

Please call Jim Thornton @ 467-8010, 467-8011, or email: jthornton@greenvillesc.gov

